

# UST-3 Notice of Intent: UST Permanent Closure of Change-in-Service

**FOR TANKS IN  
NC**

**Return completed form to:**

The DWM Regional Office located in the area where the facility is located. SEE MAP ON THE BACK OF THIS FORM FOR REGIONAL OFFICE ADDRESSES.

STATE USE ONLY

I.D. # \_\_\_\_\_

Date Received \_\_\_\_\_

## INSTRUCTIONS

Complete and return at least five (5) working days prior to closure or change-in-service if a Professional Engineer (P.E.) or a Licensed Geologist (L.G.) provides supervision for closure or change-in-service site assessment activities and signs and seals all closure reports. Otherwise, a thirty (30) day notice is required.

### I. OWNERSHIP OF TANKS

Owner Name (Corporation, Individual, Public Agency, or Other Entity) \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_  
 State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Area Code \_\_\_\_\_ Phone Number \_\_\_\_\_

### II. LOCATION

Facility Name or Company \_\_\_\_\_  
 Facility ID # (If known) \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Area Code \_\_\_\_\_ Phone Number \_\_\_\_\_

### III. CONTACT PERSONNEL

Name \_\_\_\_\_ Job Title \_\_\_\_\_ Phone Number \_\_\_\_\_

### IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN SERVICE

- |  |  |   |
|--|--|---|
| <ol style="list-style-type: none"> <li>Contact local fire marshal.</li> <li>Plan entire closure event.</li> <li>Conduct Site Soil Assessment.</li> <li>If removing tanks or closing in place, refer to API Publication 2015 <i>Cleaning Petroleum Storage Tanks</i> and 1604 <i>Removal and Disposal of Used Underground Petroleum Storage Tanks</i>.</li> </ol> | <ol style="list-style-type: none"> <li>Provide a sketch locating piping, tanks and soil sampling locations.</li> <li>Submit a closure report in the format of UST-12 (including the form UST-2) within thirty (30) days following the site investigation.</li> <li>If a release from the tanks has occurred, the site assessment portion of the tank closure must be conducted under the supervision of</li> </ol> | <p>a P.E. or L.G., with all closure site assessment reports bearing the signature and seal of the P.E. or L.G. If a release has not occurred, the supervision, signature or seal of a P.E. or L.G. is not required.</p> <ol style="list-style-type: none"> <li>Keep closure records for three (3) years.</li> </ol> |
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### V. WORK TO BE PERFORMED BY

Contractor Name \_\_\_\_\_  
 Address \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Primary Consultant \_\_\_\_\_ Phone No. \_\_\_\_\_

### VI. TANKS SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

Tank ID #	Tank Capacity	Last Contents	Proposed Activity		
			Closure		Change-In-Service
			Removal	Abandonment in Place	New Contents Stored
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	

### VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

I understand that I can be held responsible for environmental damage resulting from the improper disposal of my USTs. Read note on the back of this form before signing.

Print name and official title \_\_\_\_\_

Signature _____	Date Signed _____	SCHEDULED REMOVAL DATE _____	<b>Notify your DWM Regional Office 48 hours before this date if scheduled removal date changes</b>
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You must make sure that USTs removed from your property are disposed of properly. When choosing a closure contractor, ask where the tank(s) will be taken for disposal. Usually, USTs are cleaned and cut up for scrap metal. This is dangerous work and must be performed by a qualified company. Tanks disposed of illegally in fields or other dump sites can leak petroleum products and sludge into the environment. If your tanks are disposed of improperly, you could be held responsible for the cleanup of any environmental damage which occurs.



**North Carolina Department of Environment  
and Natural Resources**

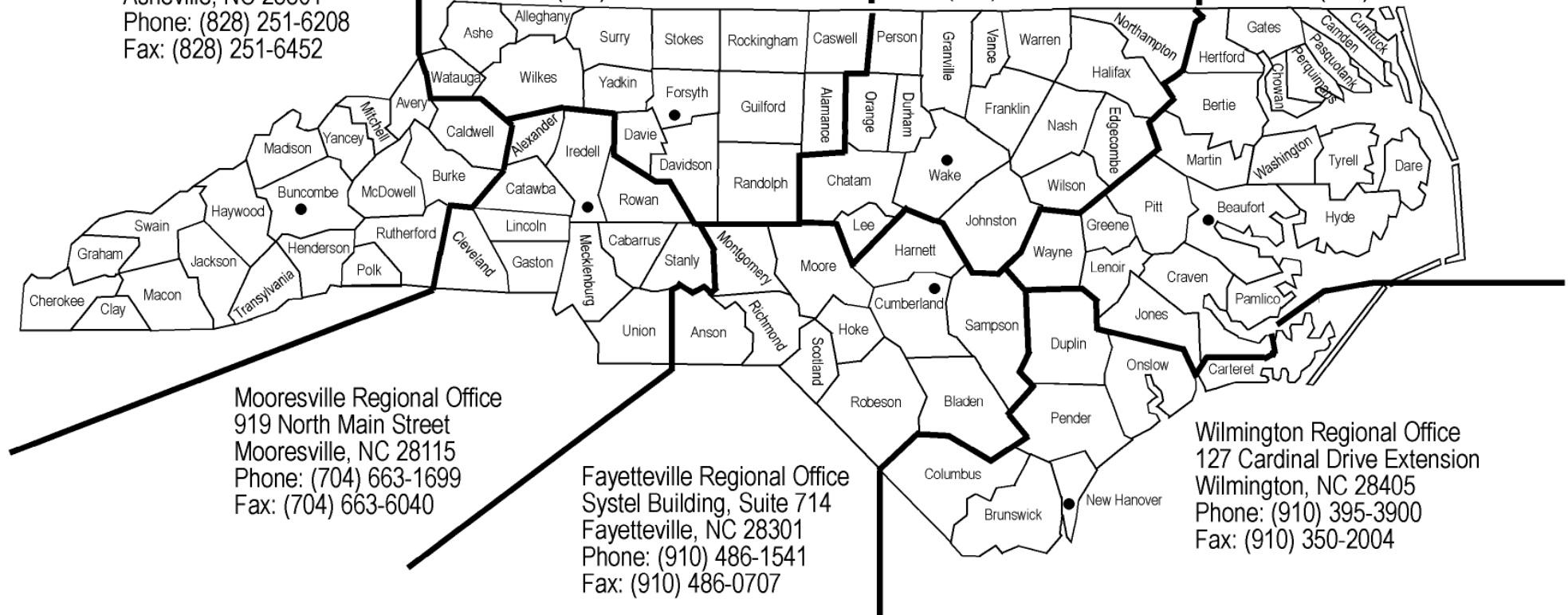
Division of Waste Management  
UST Section Central Office  
1637 Mail Service Center  
Raleigh, NC 27699-1637  
(919) 733-8486 FAX (919) 733-9413

**Asheville Regional Office**  
Interchange Building  
59 Woodfin Place  
Asheville, NC 28801  
Phone: (828) 251-6208  
Fax: (828) 251-6452

**Winston-Salem Regional Office**  
585 Waughtown Street  
Winston-Salem, NC 27107  
Phone: (336) 771-4600  
Fax: (336) 771-4632

**Raleigh Regional Office**  
1628 Mail Service Center  
Raleigh, NC 27699  
Phone: (919) 571-4700  
Fax: (919) 571-4718

**Washington Regional Office**  
943 Washington Square Mall  
Washington, NC 27889  
Phone: (252) 946-6481  
Fax: (252) 975-3716



**Mooresville Regional Office**  
919 North Main Street  
Mooresville, NC 28115  
Phone: (704) 663-1699  
Fax: (704) 663-6040

**Fayetteville Regional Office**  
Systel Building, Suite 714  
Fayetteville, NC 28301  
Phone: (910) 486-1541  
Fax: (910) 486-0707

**Wilmington Regional Office**  
127 Cardinal Drive Extension  
Wilmington, NC 28405  
Phone: (910) 395-3900  
Fax: (910) 350-2004